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A FOLLOWER - CENTRIC MODEL: PREDICTORS OF JOB SATISFACTION AND PERCEPTION OF LEADER EFFECTIVENESS IN LEBANESE REGISTERED NURSES

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A FOLLOWER - CENTRIC MODEL: PREDICTORS OF JOB SATISFACTION AND

PERCEPTION OF LEADER EFFECTIVENESS IN LEBANESE REGISTERED

NURSES

By

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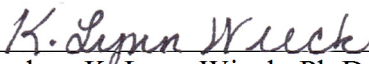
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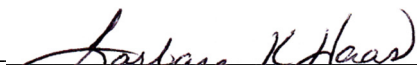
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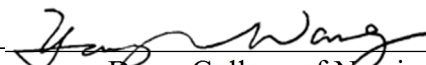
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Dedication

This dissertation work is dedicated to the memory of my late father and mother.

Suheil and *Najat* you cultivated in me the true value of knowledge and education, for that

I will be forever grateful.

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Abstract

A FOLLOWER - CENTRIC MODEL: PREDICTORS OF JOB SATISFACTION AND PERCEPTION OF LEADER EFFECTIVENESS IN LEBANESE REGISTERED NURSES

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Leaders and their followers share the work environment; they live the same

challenges, and face the same problems (Baker, 2007; Uhl-Bien et al., 2014). However,

in nursing little is known about the effect of the quality of the manager – follower

relationship and work engagement in formulating a follower's perception of leadership

and its impact on job satisfaction. In a country such as Lebanon that has the eighth

lowest nurse density in the Eastern Mediterranean Region (EMR) and suffers from

excessive nurse migration and low nurse satisfaction and retention rates (El-Jardali,

Dimassi, Dumit, Jamal, & Mouro, 2009) understanding the factors influencing nurse

satisfaction becomes a priority. It is also important for clinical nurse leaders to be

associated with engaged and committed followers in order to achieve positive outcomes.

Followers are direct care nurses who practice in acute care in the capacity of registered

nurses and under the first level supervision of a nurse manager. Effective and engaged

followers are those who show intelligence, commitment, integrity, independence, and

courage (Kelley, 1988). The relationship between the leader and followers is not

unidimensional, but it is rather an interdependent relationship. Followers expect their

leaders to be reachable, honest, empathic, visionary, and to be involved in employee

development (Sherman, 2012).

Follower-centric relational predictors that impact nurses' job satisfaction in acute

care was the focus of this study. Using a predictive correlation design, this study

examined the association between the registered nurses' (RNs') (a) quality of relationship

with the nurse manager and (b) work engagement and how these variables impact the

registered nurses' (followers) perception of leadership effectiveness and job satisfaction.

Findings of the study supported that better work engagement and positive follower-nurse

manager relationship will impact an enhanced perception of leader effectiveness and

increase RNs job satisfaction.

<center>**Chapter One**</center>

<center>Overview of the Research Study</center>

<center>**Overall Purpose of the Study**</center>

Adequate numbers of nurses are a crucial aspect in the provision of positive healthcare outcomes (Kane, Shamliyan, Mueller, Duval & Wilt, 2007; Needleman, 2015). Meta-analysis findings concluded statistical and substantive associations between nurse staffing and a variety of patient outcomes including mortality, failure to rescue, pulmonary failure, hospital-acquired pneumonia, and the length of hospital stays (Kane, et al., 2007; Needleman, 2015). During times of global shortage, it is important to understand factors that affect nurses' perceptions of effective leaders and how such perceptions affect overall job satisfaction. This way future nursing retention efforts and leadership development initiatives can emphasize the role that high quality leader follower relationships, better engagement of nurses, and enhanced perception of leader effectiveness would play in affecting nurse job satisfaction.

The need for adequate numbers of nurses is a global and national concern. In the United States, the US Department of Labor (2015) projected an employment growth of 439,300 RNs by the year 2024, representing a 16 % increase between 2014 and 2024 (Bureau of Labor Statistics, 2015). Also, the need for registered nurses in Lebanon is the largest among the Eastern Mediterranean Region (World Bank, 2011). The current Lebanese ratio is 2.7 nurses per 1000 people, far below the global average of 4.6 per 1000 people (World Health organization, 2006).

The region suffers from a scarcity of research exploring nursing workforce issues and their impact on healthcare outcomes (El-Jardali, Alameddine, Dumit, Dimassi, Jamal

& Maalouf, 2011). Leader – follower relationships research is primarily leader centric. An understanding of what makes leaders effective in the eyes of their followers is lacking in nursing. Factors contributing to RNs job satisfaction was well documented in literature (Cummings, Lee, MacGregor, Davey, Wong, Paul, & Stafford, 2008; Kim & Thompson, 2008); however leader- follower relationships, work engagement, and nurse followers' perceptions with regards to what constitutes effective clinical leadership were not addressed (Kean, Haycock-Stuart, Baggaley, & Carson, 2011). These same factors were also lacking in the Lebanese context.

The purpose of the study was to examine the effects of follower - centric predictors (quality of relationship with the nurse manager, work engagement, and perception of leader effectiveness) have on nurse job satisfaction. This investigation is particularly crucial at this time given the strong established link between nurse staffing and patient outcomes (Needleman, 2015); it has been established that enhanced nurse satisfaction and positive perception of leader effectiveness will improve nurse retention in clinical care, thus contributing to less constraints on nurse staffing and ultimately impacting the bottom line in patient outcomes.

Introduction to the Articles

This portfolio contains a published article and a manuscript, *A Concept Analysis of "Follower" Within the Context of Professional Nursing* (Abdel Malak, 2016) and *A Follower - Centric Model: Predictors of Job Satisfaction and Perception of Leader Effectiveness in Lebanese RNs.* The first article used Walker and Avant's concept analysis method (2005) to explore the concept of follower in professional nursing context. Nursing and psychological databases were reviewed and provided insight into

the meaning and uses of the term *follower*. Using the concept exploration approach, defining attributes were proposed along with antecedents and consequences to clarify the concept uses. Model and additional cases provided exemplars of concept application. Finally, the empirical referents of practical use and measurement in the professional environment are presented. This article was published in Nursing Forum, on May 19, 2016 (early online view) and may be cited as follows: Abdel Malak, R. S. (2016). A concept analysis of "Follower" within the context of professional nursing. *Nursing Forum*. doi: 10.1111/nuf.12158.

The second article is a report of a correlational predictive study of characteristics of followers or front-line RNs in explaining variance in the outcomes of leader effectiveness and job satisfaction using a sample of acute care Lebanese registered nurses. The author's proposed model examined the relationship among variables. Predictor variables sequentially tested included: (a) leader –follower relationship was evaluated using LMX-7 and (b) Utrecht Work and Engagement Scale (UWES-9) measured work engagement. The findings revealed that leader –follower relationship and work engagement explained *55%* of the variance in the followers' perception of leader effectiveness ($R^2 = .55, p < .01$). Leader follower relationship, work engagement, and perception of leader effectiveness explained 54% of the variation in followers' job satisfaction ($R^2 = .54, p < .01$).

The implications of the study findings are important for both the leaders and followers in Lebanese nursing clinical practice. Findings suggest that a nurturing and respectful relationship with the nurses might improve the nurses' perception of leader effectiveness and job satisfaction. The findings support as well the importance of

cultivating engagement and its positive effect on nurse retention. Future research

matching both followers and leader ratings on the same measures are important to clarify

how both value concepts relevant to professional practice.

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Chapter Two

Abstract

Problem: Theory and research on leaders is abundant; however, the follower concept is noticeably absent from the leadership literature.

Method: This article uses Walker and Avant's concept analysis method to explore the concept of follower in professional nursing. A literature search of nursing and psychological databases provided insight into the meaning of a follower. Using the concept exploration approach, defining attributes are proposed along with antecedents and consequences to clarify the concept uses. Model and additional cases provide exemplars of concept application. Finally, the empirical referents of practical use and measurement in the professional environment are presented.

Conclusion: Although it is clear that leadership without followers is impossible, the fact remains that clarification of which elements constitute followers are on the periphery of current leadership efforts.

Implication for Nursing: Conceptual clarity is necessary to improve the way nurse leaders identify situations of following and non-following in professional context and guide how they will engage followers to achieve goals.

Keywords: Concept analysis; follower; followership; leadership; professional nursing

A CONCEPT ANALYSIS OF 'FOLLOWER' WITHIN THE CONTEXT OF

PROFESSIONAL NURSING

Aim

Nurse leaders and their followers coexist in the same world; they face the same challenges, and live the same problems in today's healthcare complex environment. The follower concept is closely intertwined with leadership; and lacks a unified definition. Traditionally in leadership literature, studying followers as an essential component of the leadership process was largely overlooked (Uhl-Bien, Riggio, Lowe, & Carsten, 2014). Followers were commonly viewed as the recipient of the leadership influence (Uhl-Bien et al., 2014) or the contributors to leadership (Meindl, 1995) until recent mainstream changes moving away from traditional to more complex leadership theories (Uhl-Bien, Marion, McKelvey, 2011; Uhl-Bien et al., 2014; Weberg, 2012). For that, the value of engaged followers alongside effective leaders is increasingly being recognized for improved team and organizational performance (Whitlock, 2013). Nurse followers are more and more practicing in professional contexts in which governance is shared and organizational structures are flatter. Therefore, understanding better this concept is particularly relevant to nursing today more than ever. It is the starting point upon which further types of analysis can be built to evaluate the progression of roles and relationship of followers and leader in professional nursing nowadays. The purpose of this article is to review the literature in order to determine the theoretical foundations surrounding the concepts of follower and followership. Then, using the Walker and Avant (2005) framework for concept analysis, the characteristics and attributes of the follower are explored in order to achieve conceptual clarity.

Background

Significance of the Follower Concept to Nursing

Despite that the world has many more followers than leaders and that many leaders in organizations are themselves followers, the conventional leadership research is characterized as being overly leader-centric resulting in a very narrow view of leadership (Collinson, 2006; Kelley, 1988). The seminal works by Kelley (1988) and Meindl (1995) on followership highlight the interdependence of the follower and leadership concept, in which leadership cannot and does not occur without followers.

Being a capable leader of clinical nurses is a complex process and requires more than the application of management and leadership theories to the practice situations (Benner, Tanner, & Chesla, 2009). The relationship between nurses and their leaders is not linear (Weberg, 2012). The shift to flatter organizational structures and the rise of shared governance, both place the follower's concept at the center of any discourse relevant to professional nursing.

Many scholars identified contributing reasons for the scarcity of research in the area of followership. The negative stigma associated with the term *follower* is one factor; typically a *follower* is perceived to be submissive, passive, and obedient. Furthermore, followers are traditionally viewed as a homogenous, uncritical, obedient group of people following undeniably the directives of a superior leader. This passive symbolism caused a devaluation of the followers' role in the leader-followers dyadic relation, shifting the attention in research and organizations away from the obedient mass (followers), and putting the focus on the leader as the catalyst agent responsible for organizational change

(Baker, 2007; Bjugstad, Thach, Thompson, & Morris, 2006; Collinson, 2006; Kelley, 1988).

From a follower-centric approach, Lord and Brown (2001) affirm that leadership scholars have invested minimal efforts to clarify *how* and *what* engages followers and then work backward to build these processes for effective leadership to happen. According to Collinson (2006), research is heading in the opposite direction; it is focusing predominantly on the study of leadership to answer effective *followership* questions. Findings in the nursing literature are aligned in the same path. The concept is scantily researched and is generally viewed in a traditional leader-centric perspective (Kean, Haycock-Stuart, Baggaley, Carson, 2011).

The change in the work context, characterized by the spread of the information era, dismissal of the command and control industrial style, and the emergence of flatter organizations, is challenging the traditional stereotype regarding followers. As such, the shifting focus is bringing to the forefront the role followers' play .Many researchers realized that "leadership is not just about leaders. Followers matter, as do situations" (Riggio, 2014, p.16), and the key to high performance lies in the followers (Uhl-Bien et al., 2014). There is a growing need to understand the dynamics of the interdependent relationship of the follower and leader in order to increase organizational performance (Bjugstad et al., 2006; Chaleff, 2009; Kelley, 1988; Lord & Brown, 2001; Meindl, 1995). Failure to clearly identify the different types of followers and how they impact the leadership is believed to consequently hinder organizational performance in today's work context (Crossman & Crossman, 2011; Kean & Haycock-Stuart, 2011; Kean, et al., 2011; Kelley, 1988).

From here stems the importance of the *follower* concept to any organization including healthcare. Clearly defining this concept is particularly relevant to nursing professional practice. It guides the understanding of the dynamics associated with followership, identifies factors that trigger followers' effectiveness and engagement from a nursing leadership standpoint, and clarifies key constructs that cultivate effective leader-follower relationships in the nursing practice context.

Overview of Followership Theoretical View

Theoretical explorations go down to the basis of the concept, to understand the "why" instead of simply explaining the "what". The theoretical views surrounding this concept were predominantly leader-centric. The leader is seen as the source of power and the main driver for organizational and followers' outcomes. The leader-centric approaches perceive followers as passive subordinates and recipient of the leader's directions (Uhl-Bien et al., 2014). Leadership theories have over-idealized or *romanticized* the leader as the ultimate source of authority and directive thinking while subordinating the follower in the equation (Baker, 2007; Meindl, 1995). Even transformational leadership, one of the most studied and progressive leadership theory, is considered to be leader-centric. This theory fails to consider and acknowledge the follower's contributions in the transformational process. It rather concentrates on the importance of improving the quality of the leader-follower relationship (Uhl-Bien et al., 2014).

Although management scholars did not adopt an active view of followership until the 1990s, the interest in this concept was rising in many behavioral science disciplines long before. Behavioral scientists proposed to study the psychological and social links

that makes the followers follow. At a later stage, it led to the foundations of the exchange theory and is considered the early precursor of the active followership view (Baker, 2007).

Mainstream changes in the work context, namely flatter organizations and increased dependence on the follower in an era of economic constraints, shifted the attention and placed followership under the spotlight (Kellerman, 2007). It represents "the characteristics, behaviors, and processes of individuals acting in relation to leaders" (Uhl-Bien et al., 2014, p.96). Follower-centric approaches view leadership as a social construction process in which the role of the follower is central in the construction of the leader (Kean et al., 2011; Kohles, Bligh, & Cartsens, 2012; Uhl-Bien et al., 2014). In parallel to the follower-centric approaches, theories viewing followers and leadership as a relational process were emerging as an alternative to the follower-centric. Hollander was one of the earliest theorists to acknowledge the relational nature of this process. The relation is built over time, in which an active transaction or exchange takes place between the leader and the follower (Baker, 2007; Uhl-Bien et al., 2014). The leader-follower dyad is considered to represent roles in a dynamic relation. In this dyad, the leader showcases active influence to assert leadership, and the followers respond by accepting authority and affirm leadership (DeRue & Ashford, 2010; Uhl-Bien et al., 2014).

Followers and complexity leadership.

The shift in the paradigm from traditional leadership to complexity theories is a necessity to align with the current move towards the knowledge era (Uhl-Bien, Marion, McKelvey, 2011). Traditional leadership theories and models are no longer suitable to inform the leaders' behaviors in the complex healthcare systems (Weberg, 2012).

Previously, research on traditional leadership focused mainly on choosing the right

leaders and whether they function adequately or not. As a result, the relationship with the

followers was left out. For that, a new type of leadership is needed to respond to the

dynamic and complex progress in healthcare and to which the followers are central

stakeholders (Weberg, 2012).

Traditional models are no longer effective (Uhl-Bien, Marion, McKelvey, 2011;

Weberg, 2012). According to Ulh-Bien et al. (2011) complexity leadership theory (CTL)

"is a framework for leadership that enables the learning, creative, and adaptive capacity

of complex adaptive systems" (p.303). It is presented as the alternative to current

ineffective models providing the adequate framework for the complex and knowledge

producing organization. In CLT, the roles of the follower and the leader –follower

relation take different perspective. It is no more viewed as linear, top to bottom

relationship (Weberg, 2012). It is rather an interactional process, placing the leader as a

facilitator inside the complex systems of healthcare and amidst many parameters

(Weberg, 2012). Whereas, the followers are enabled, more autonomous, and driven to

find their own solutions in this unpredictable (complex) environment (Uhl-Bien, Marion,

McKelvey, 2011; Weberg, 2012). For example, setting a shared governance nursing

team in a unit by the leader to understand why the pressure sores measures are not

improving and proposing alternate solutions to address the problem, illustrates the

applicability of the CLT framework at the micro level of the nursing unit. CLT redefines

the role shift and changes in the relational dynamics between the leader and followers.

Results of the Concept Exploration

Identification of Concept Uses

The initial research related to followership dates back to the 1950's in social sciences. Kelley's seminal publication, *In Praise of Followers* (1988) followed by the work of Chaleff, *The Courageous Follower* (2003) are considered landmark publications on which subsequent work on followership is based (Baker, 2007; Crossman & Crossman, 2011). A consensus around a unified definition of the term *follower* is still lacking. The negative stereotype associated with this concept will persist till effective followership is appropriately defined (Bligh and Kholes, 2012).

Scholars use the terms *follower* or *followership* (the act of being a follower) in different manners: 1) as the contrary of leadership; 2) to indicate a direct or indirect influential process of leadership; 3) as a role for those who are non-leaders; and 4) to indicate a group influenced or directed by a leader (Baker, 2007; Crossman & Crossman, 2011; Kellerman, 2007; Uhl-Bien et al., 2014).

Traditionally, followers were viewed in a hierarchal perspective, as *subordinate* or *direct report,* considered to have less power, authority, and influence than superiors (Crossman & Crossman, 2011; Kellerman, 2007). Thereafter, Kelley (1988) supported the view of followership and leadership as roles in relation and determined effective followers as those who demonstrate higher motivation and positive perception of their follower role. More recently, the relational connection between the follower and the leader evolved to be *interactional* indicating that an influential process is taking place in the leadership-followership dyad (Carsten, Uhl-Bien, West, Patera, & McGregor, 2010; Crossman & Crossman, 2011; DeRue & Ashford, 2010). Scholars are debating the

elimination of the term *follower* altogether because of the negative (submissive) meaning

that it implies (Uhl-Bien et al., 2014). Shamir (2012) argues that eliminating *follower*

from the leadership lexicon signifies that leadership is a fully shared process and thus

becomes a social phenomenon equivalent to collaboration and teamwork.

Exploring the dictionary meaning of the term follower resulted in identifying the

following uses: (a) antonym of the word leader; (b) one who subscribes to the teachings

or adopts the methods, beliefs of another; (c) one that chases or travels behind someone;

(d) one that imitates or copies another; (e) one that waits for direction; and (f) a machine

part moved by (or receive motion from) another part (Follower, 2013a; Follower, 2013b).

Generally, various terms are used to imply the same meaning of *follower*. In the

organizational context, the terms *subordinate* and *employee* were identified. New terms

with less negative stigma than *subordinate* emerged lately, namely *collaborator*, *partner*,

participant, and *team member* (Ulh-Bien et al., 2014; Riggio, 2014).

In marketing, the terms *fan*, *enthusiast, and supporter* were commonly found and

are highly pertinent to the social media such as Twitter® and Facebook®. From a spiritual

perspective, terms such as *disciple, devotee, pupil, and cultist* were identified. *Supporter,*

adherent, and partisan were terms associated with the use of follower in a political

context (Follower, 2013a; Follower, 2013c).

In the military, the follower concept is rapidly progressing. Initially, it implied

one that follows orders unquestionably in a strict hierarchy of rank, power, and authority

difference. In the absence of leadership, the follower is expected to assume the best

judgment for mission accomplishment (Crossman & Crossman, 2011). This

understanding grew to include an experiential component: "Acting first as follower is the

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best way for the leaders to subsequently understand their followers" (Bass & Bass, 2008). With further progression, military leaders learned that their moral obligation for their followers comes before themselves (Kolditz 2009). Which brings to mind the Japanese business schools practice; teaching leadership and followership as two integrated components (Grayson & Speckhart 2006). More recently, the essentials of building dynamic followership in the military ranks is gaining momentum as a way for effective leadership (Latour & Rast, 2004).

Follower Defining Attributes

Defining attributes are necessary elements of the concept that must be present in order for the concept to occur (Walker & Avant, 2005). In organizational context, three defining attributes (DA) depicting who is a follower were extracted using synthesis of related literature. The attributes are: *subordinate, intertwined relationship with the leader, and perform tasks to achieve a common goal*.

A subordinate relates to position in the hierarchy. A follower is a *subordinate,* assuming a role that is less in rank, power, influence, or authority in relation to another role. Kelley (1988) asserted that in organizations there are more followers than leaders, and all leaders have bosses to whom they report in their turn. Thus, difference in rank, power, and authority is the first determinant indicating if someone is in a follower or a leader role in the hierarchy.

The second DA refers to the *intertwined relationship with the leader*. A follower cannot exist without a leader, and the reverse is true. In this relational process, the follower is on the receiving end of the leadership. However, depending on the type, style, or compatibility with leadership, following behaviors may vary according to a

continuum from passive to active (Kelley, 1988; Chaleff, 2009). Thus, the follower is a recipient of leadership by exhibiting or granting following behaviors in response to the claiming or influence attempts of the leader (DeRue & Ashford, 2010).

The third DA is associated to the reason why followers exist. In essence, followers *perform tasks to achieve the goal* or vision. Napoleon (leader) without his army (followers) was simply a common person with grandiose ideas (Kelley, 1988). In a broader approach, followers are influenced by the relationship with the leader and the task at hand (Carsten et al., 2010; Crossman & Crossman, 2011; Kelley, 1988; Bligh & Kholes, 2012). As such, the followers produce and achieve goals. They are the *implementers* in the followership-leadership dyad.

The Model Case

Model cases are examples used to illustrate the use of concept including all its defining attributes (Walker & Avant, 2005). For example, ABC is a large tertiary healthcare facility that decided to automate its incident reporting process and to become entirely paperless in six months. John is experienced in quality, a hard worker, competent with great interpersonal skills. ABC appointed a diverse team of employees and assigned John as the project leader. Using his interpersonal skills and high level of competency in the incident reporting process, John supported the team through every phase, facilitated the work processes, and was successful in persuading them about the importance of this project. In return, his co-workers acknowledged him as the project leader and closely collaborated with him during the entire process. Together they were able to achieve the project successfully.

This model case demonstrates all three defining attributes of the follower concept. In the hierarchy of ABC, a group of members (followers) were assigned a leader (John). Thus a difference in rank and status existed. The group were the recipients of John's leadership. In his turn, he demonstrated attempts of influence (leadership claim) by supporting, facilitating, and persuading the group along the project timeline. In response, the members exhibited following behavior (granting the leader role) by acknowledging John as the team leader and closely collaborating with him to achieve the goal. As such they acted as the implementer of the task and achieved the objective.

The Contrary Case

Contrary cases are cases demonstrating what the concept is *not* (Walker & Avant, 2005), used here to determine what does not represent the follower concept. For example, Joy is the nurse manager on a 25-beds medical surgical unit. She informs the members during the staff meeting that the unit productivity has to be increased. For that, the capacity will be expanded to become 30 beds with no increase in staffing and everyone will need to work the mandatory overtime required for coverage. The staff members left the meeting and never reported back to work.

The employees in Joy's unit refused to accept the subordinate role. They refused to follow their leader. Both Joy and her team are no more in an intertwined relationship. The followers are no more implementing or performing the tasks to achieve a goal. The team members did not grant Joy's claim of leadership and refused to implement the decision. They are out of the follower role since they refused to demonstrate any following behaviors.

The Borderline Case

Borderline cases are known as those cases that use some but not all the defining attributes of the concept. They serve mostly to show how much model cases in comparison are consistent with the concept's defining attributes (Walker & Avant, 2005). For example, a team of three operating room (OR) registered nurses in an acute care center were headed by an experienced and well-respected OR nurse manager to redesign the OR workflow and make it more efficient. The new workflow redesign was to be presented at the hospital senior level in meeting to secure approval. All the members collaborated closely with the OR manager on this project. They had confidence in the team leader. The OR nurse manager has a long-standing experience, competence and excellent interpersonal skills. The team members were engaged to work on the details of the redesign. On the day of the presentation, members did not show up to the meeting because the OR nurse manager was very ill and bed ridden with influenza. By consequence, the meeting was cancelled and the approval for the proposal was not secured.

This borderline case exhibits the defining attributes of the follower's concept with the exception of the *task implementer* attribute. There was a hierarchical difference in status between the members and their leader. They demonstrated following behavior to his leadership claims but this did not lead to the accomplishment of the goal since they could not secure approval for the redesign proposal. Had the manager showed to the meeting and not been sick, the approval would have been most likely secured.

Concept Antecedents

The antecedents identified in the literature are mostly focused on characteristics or events that would lead to *effective* followership. Kelley (1988) proposed *critical thinking* (to what degree followers exercise independent thinking) and their *perception of own follower's role* as key antecedents to attain successful outcomes. Later, Kellerman (2007), suggested *engagement level, deference,* and *dominance* as antecedents. Crossman and Crossman (2011) proposed *dependency.* Bligh and Kholes (2012) referred to the *co-production belief* as an antecedent emanating primarily from a follower-centric approach. In military, *trust* and *confidence* in leadership were prominent antecedents for followership to occur (Dirks & Ferrin, 2002). In nursing, Kean et al. (2011) highlighted the social *context* and *interdependence* between the followers and the leader for followership to occur. These themes were also asserted by Dixon and Westbrook (Dixon & Westbrook, 2003; Kean et al., 2011).

Uhl-Bien et al. (2014) offered a conceptual framework whereby *followership characteristics* are proposed to be the antecedents for the *followership behaviors*, defined according to a continuum of effectiveness. Followership characteristics are divided into three major clusters: (a) traits, such as goal setting, negotiation or political skills; (b) motivation, such as being mission conscious and possessing a sense of power orientation; and (c) follower perception and construction, such as role orientation, and identity as followers.

Based on the presented overview, a set of antecedents was identified by analyzing the common themes present in the literature, then reducing these from a follower-centric angle by asking three questions: (a): what do followers follow in spiritual, political,

military, organization, or other contexts?; (b) what factors make them follow (or not)?; and (c) what environment makes them willing to follow?. This approach engendered the following proposed attributes: *defined purpose*, *followers' traits and identity, motivation, influence, and acceptance of leadership*. Plausibly, followers need something to follow, i.e. a *defined purpose*. It could be a common goal, a shared value, a belief, or a leader. Key factors that make (or enable) them to follow could be associated with the *followers' traits, role identity, and level of motivation.* Finally, followership does not exist alone; for it to occur, followership needs to happen in relation to leadership. Followers need to be *influenced by* and *have acceptance or deference* for the leadership claim in order to follow. Advancing *influence* and *acceptance of leadership* as antecedents align with the proposition of DeRue and Ashford (2010) who suggest a process of claiming and granting between leaders and followers. It is anticipated that influence and acceptance would vary, thus resulting in different followers' behaviors fluctuating across a continuum of effectiveness.

Concept Consequences

Studying followership is "an investigation of the nature and impact of followers and following in the leadership process" (Uhl-Bien et al., 2014, p. 89). In today's world, that is predominantly information and competition–based, many authors assert that the key for organizational success lies partially or fully within followers (Bligh & Kohles, 2012; Chaleff, 2009; Dixon & Westbrook, 2003; Kelley, 1988). This is namely due to the fact that there are more followers than leaders, and they (followers) are the implementers of ideas, goals, or visions.

When studying *followership,* Uhl-Bien et al. (2014) proposed that followership outcomes when they occur are dependent on the individual follower characteristics, the relationship with the leader, and the process of leadership. These consequences are the results of the interaction between the followership characteristics and behaviors in the leadership process. *Followers' effectiveness* and *organizational advancement* were depicted as outcomes identified at the individual follower level. Whereas, *trust* and *leadership-member exchange* were advanced as outcomes occurring within the leader-follower relationship. At the leadership process level, *change* and *mission or goal accomplishment* were noted as consequences (Uhl-Bien et al., 2014).

Empirical Referents

Empirical referents are the ways the concept's defining attributes can be recognized and measured. Empirical referents are also important from a practice perspective. They provide observable phenomena through which the presence or absence of the concept is verified (Walker and Avant, 2005).

The *Romance of Leadership Scal*e (RLS) is utilized to assess the influence of leaders in organizations measured by followers (Meindl, 1995; Schyns, Meindl, Croon, 2007). This one-factor instrument is believed to fill a missing gap related to assessing the perception of follower. RLS critics warned that if this scale is used alone, it yields distorted findings because it fails to take into consideration the leader and the situation in which followers act. For that, Bligh, Kholes, and Pillai recommended correlating followers' RLS scores with the leader ratings (Bligh, Kohles, & Pillai, 2012).

In the absence of a unified conceptual definition, many resorted to qualitative methods to capture the concept essence in terms of followers' social construct in

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perceiving leadership and the impact of the situations in which the followership-leadership process occur. A proposed path is to measure followers' satisfaction with the leader in relation to leadership styles, and then link it to exhibited followership behaviors of on the continuum of effectiveness. Another interesting path to consider for enhancing the understanding of the follower concept in the co-creation of leadership, is to assess the leaders' satisfaction with their own leadership impact and confidence in achieving goals; then associate it with their followers' perception and measures for the same domains.

Conclusions

The main conclusions of this analysis reinforce these views: Followers and leaders exist in an interrelated context; a great deal of organizational success lies in the followers' hands; followers are believed to behave according to a continuum from less effective to more effective; and there is a pressing need for a unified definition for effective followership.

From a nursing research perspective, a deeper understanding is needed along the following streams: how leadership is perceived and measured from the follower's perspective, which leadership styles or attributes best induce effective followership, and what is the impact of the context on the followership-leadership relational process with the redefinition driven by complexity leadership theories. Understanding followership may be particularly important for understanding leadership development in contexts increasingly characterized as shared, flat, and more complex in healthcare.

Implications for Nursing Practice

It is important for successful nurse leaders to be associated with engaged and committed followers in order to achieve the wanted vision. Exemplary and engaged

followers are those who show intelligence, commitment, integrity, independence, and courage (Kelley, 1988). The relationship between the leader and followers is not one sided. Followers expect from their leaders to be accessible, trustworthy, empathic, visionary, and to be invested in employee development (Sherman, 2012). "Good followers invest time and energy in making informed judgments about who their leaders are and what they espouse" (Kellerman, 2007, p.91). Nurse leaders at every level of the organization need to understand the dynamics of their followers, what they want from their leader, and how to engage them towards the achievement of the vision. Enhanced understanding of the follower concept will impact the nursing practice at many levels. Conceptual clarity will improve the way nurses identify situations of *following* and *non-following* in nursing. It will guide how nurse leaders are developed and how engaged followers are cultivated in order to achieve positive outcomes at all levels in healthcare.

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Chapter Three

Abstract

Problem: Followers have traditionally been studied, often to their detriment, from a leader-centric perspective. In nursing acute care, little is known about how the quality of the relationship between follower and leader, work engagement, and perception of leader effectiveness affect followers' job satisfaction.

Theory: The model proposed by the author served as the theoretical foundation for the study.

Research Hypotheses: (*Ha1*) Leader follower relationship and work engagement explain variation in leader effectiveness; and (*Ha2*): Leader follower relationship, work engagement, and leader effectiveness explain variation in job satisfaction.

Research Design: The study used a predictive correlational design.

Methods: The study tested characteristics of followers or front-line RNs to explain variance in the outcomes of leader effectiveness and job satisfaction using a sample of acute care Lebanese RNs. Predictor variables sequentially tested included: (a) Leader – follower relationship was evaluated using LMX-7 and (b) Work engagement, measured using Utrecht Work and Engagement Scale (UWES-9). Outcome variables of leader effectiveness and job satisfaction were measured using Leadership Effectiveness Measure (LEM) and Job Satisfaction Index (JSI-4) respectively. Data were collected using an online survey application (*N*=127) and offered in both English and French. Multiple regression tested the model.

Results: Leader –follower relationship and work engagement explained *55%* of the variance in the followers' perception of leader effectiveness (R^2=.55, *p* <.01). Leader-follower relationship, work engagement, and perception of leader effectiveness explained

54% of the variation in followers' job satisfaction ($R^2 = .54$, $p < .01$).

Conclusions: Work engagement and a positive relationship with the nurse manager will engender an enhanced perception of leader effectiveness and increase RNs' job satisfaction.

Keywords: Nursing, follower, leader effectiveness, job satisfaction

A FOLLOWER CENTRIC MODEL: PREDICTORS OF JOB SATISFACTION AND

PERCEPTION OF LEADER EFFECTIVENESS IN LEBANESE REGISTERED

NURSES

Background and Significance

Sufficient numbers of nurses are a key factor for achieving positive healthcare

outcomes. In times of global shortage, it is crucial to understand factors that affect

nurses' perceptions of effective leaders and how perceptions affect overall job

satisfaction. Future nursing retention efforts and leadership development initiatives can

then focus on fostering high quality leader-follower relationships, better engagement of

nurses, and enhanced perception of leader effectiveness.

Adequate numbers of nurses is vital for provision of quality care and maintenance

of patient safety (Kane, Shamliyan, Mueller, Duval & Wilt, 2007; Needleman, 2015).

Meta-analysis findings concluded statistical and substantive associations between nurse

staffing and a variety of patient outcomes including mortality, failure to rescue,

pulmonary failure, hospital-acquired pneumonia, and the length of hospital stays (Kane,

et al., 2007; Needleman, 2015).

The nursing shortage is not limited by national or global boundaries. An

anticipated shortage of American registered nurses has been proposed by the US

Department of Labor (2015). A projected need for a 16% increase in nurses between

2014 and 2024 has been reported (Bureau of Labor Statistics, 2015). The country of

Lebanon is also anticipating a critical shortage of nurses which is reported to be the

highest need among countries comprising the Eastern Mediterranean Region (World

Bank, 2011). Lebanon currently has a ratio of 2.7 nurses per 1000 people which is much

lower than the global average of 4.6 nurses per 1000 persons (World Health

Organization, 2006). Recent studies in Lebanon indicated an astounding percentage of

67.5% of surveyed nurses' who reported intent to leave their job within 1 to 3 years, and

1 out of 5 emigrated within 2 years of receiving their Bachelors of Nursing (El-Jardali,

Alameddine, Dumit, Dimassi, Jamal, & Maalouf, 2011, p. 206). These national figures

align with the larger context of the Eastern Mediterranean Region (EMR), particularly

low and middle income countries who are experiencing acute nursing shortages. The

region suffers from a scarcity of research exploring nursing workforce issues and their

impact on healthcare outcomes (El-Jardali, et al., 2011). Studies addressing follower -

centric factors (such as quality of relationship with the nurse manager, work engagement,

registered nurses' perception of leader effectiveness) that impact job satisfaction are

crucial. Given the strong established link between nurse staffing and patient outcomes

(Needleman, 2015), enhanced job satisfaction and a positive relationship with the RNs'

nursing manager might improve nurse retention in clinical care thus contributing to less

constraints on nurse staffing.

Nursing research in the area of leader – follower relationships is primarily leader-

centric. An understanding of what makes nurse leaders effective in the eyes of their

followers is lacking. Factors contributing to RN job satisfaction has been well

documented in literature (Cummings, Lee, MacGregor, Davey, Wong, Paul, & Stafford,

2008; Kim & Thompson, 2012); however, nurse followers perceptions with regards to

what constitutes effective nurse leaders were not addressed (Kean, Haycock-Stuart,

Baggaley, & Carson, 2011); this same information is missing from research on Lebanese

nurses.

Literature Review

Followers

Nursing followers and leaders value the workplace differently. The concept of *follower* is closely interrelated with leadership, but it is lacking a common or unified definition. The world has many more followers than leaders, and many leaders in organizations are followers in their turn (Collinson, 2006; Kelley, 1988). Despite this fact, leadership research is characterized as being overly leader-centric, and followers were understudied until a recent surge of attention. Conventionally, followers were viewed as an obedient group who undeniably followed the directives of a superior leader (Bjugstad, Thach, Thompson, and Morris, 2006). More recently, this traditional understanding shifted, and followership and leadership are being viewed as interdependent; leadership cannot and does not occur without followers (Kelley, 1988; Meindl, 1995). The traditional passive symbolism of followers resulted in research focused on the leader as the catalyst responsible for change (Baker, 2007). According to Collinson (2006), research focused predominantly on leadership to answer followership questions. To date, little is known about what followers value in their nurse leaders as determinants for successful leadership, which consequently make them exhibit following behaviors (Kean, Haycock-Stuart, Baggaley, & Carson, 2011; Sherman, 2012). Shared governance, the predominance of the information era, and the end of the command and control industrial style have all challenged this one-sided view and brought to the forefront the role followers play. There is a growing need to understand the dynamics of the interdependent relationship of the follower and leader in order to increase

organizational and individual performance (Bjugstad et al., 2006; Chaleff, 2003; Kelley, 1988; Lord & Brown, 2001; Meindl, 1995).

Effective followers were those who are engaged and perceive their follower role positively (Kelley, 1988). Furthermore, the relationship between the followers and leader evolved to be *interactional* indicating that a reciprocal influential process occurs in this dyad (Carsten, Uhl-Bien, West, Patera, & McGregor, 2010; Crossman & Crossman, 2011; DeRue & Ashford 2010). A better understanding of the dynamics associated with effective nursing followership will identify key elements needed to generate positive leader-follower relationships in the nursing professional practice context.

Leader - Follower Relationship

Rather than being separate, the leader and follower exist in a reciprocal and interdependent relationship (Dulebohn et. al., 2012; Hollander, 2008). Fundamental to this reciprocal interdependence is the dynamic exchange in which "the leader provides something and gets something in return" (Hollander, 2008, p. 14). Interactions of followers and leaders together contribute to and influence the relationship (Dulebohn et. al., 2012). Also, these interactions (or relationships) develop over time and shape the followers' perceptions of the nature and quality of these relationships. Followers' perceptions of this exchange reflect their expectations; in a way that followers' deliberate actions will be reciprocated with matching behaviors by the leader (Little, Gooty, & Williams, 2016).

Conceptually, the leader-member exchange refers to the quality of the relationship that exists between the leader and the follower (Graen & Ulh-Bien, 1995). High quality relationships are believed to be generated by frequent and appropriate communication,

and focused on the mutual interest and reciprocation between the leader and the followers (Graen & Ulh-Bien, 1995; Van Breukelen, Schyns, & Le Blanc, 2006). These relationships require a long period of time to mature, allowing reciprocation and mutual interest to develop between leader and follower (Little, Gooty, & Williams, 2016). As a result, the exchange shares commonalities with transformational exchange which builds solid, trust-based relationships (Bass & Bass, 2008; Van Breukelen, Schyns, & Le Blanc, 2006). Support becomes an important component in the leader-follower relationship, and it is manifested as acknowledgment followers can provide or suppress from their leaders and represents a personal bond that develops into loyalty and trust (Hollander, 2008).

The quality of the relationship that develops between the leader and the follower is predictive of work related outcomes at the individual, team, and organizational levels (Dulebohn et. al., 2012; Gerstner & Day, 1997; Graen & Ulh-Bien, 1995). These relationships were associated with positive attitudinal outcomes at the follower level (Gerstner & Day, 1997). Meta-analytical reviews found a significant and positive association between the quality of the leader – member relationship and job satisfaction and organizational commitment (Gerstner & Day, 1997; Graen & Ulh-Bien, 1995), overall satisfaction (Dulebohn et. al., 2012; Graen & Ulh-Bien, 1995; Gerstner & Day, 1997), satisfaction with supervisor (Deluga & Perry, 1991; Gerstner & Day, 1997), and perceived supervisor effectiveness (Deluga & Perry, 1991).

Work Engagement

In the context of a global shortage, interest in nurses' work engagement took central focus in the last decade. This interest was driven by the need to understand key factors necessary to retain and satisfy nurses (Bargagliotti, 2012). Interestingly,

compared to other hospital employees, nurses scored the lowest on work engagement (Bargagliotti, 2012; Blizzard, 2005).

Work engagement is rooted in positive (organizational) psychology focused on human strengths to promote optimal functioning (Schaufeli & Bakker, 2004) and associated with positive organizational outcomes (Bargagliotti, 2012; Schaufeli & Bakker, 2004). Burnout is the opposite of work engagement. Burned out employees are described as cynical, not committed, and lacking energy while engaged employees are enthusiastic as they demonstrated vigor and dedication to work (Bargagliotti, 2012; Schaufeli & Bakker, 2004; Thian, Kannusamy & Klainin-Yobas, 2013). Engaged employees are dynamic agents who are proactive at work and create their own positive feedback. There is also a good match between engaged employee values with those of the organization for which they work (Schaufeli & Bakker, 2004).

Two streams of empirical or theoretical definitions related to work engagement were identified. Definitions have either focused on the interaction of the person with the organization or on the engaged person's experience at work (Bargagliotti, 2012). When the focus is on the person's experience, work engagement is best conceptually defined as "a positive, fulfilling, work-related state of mind that is characterized by vigor, dedication, and absorption" (Schaufeli & Bakker, 2004, p.4). Vigor, dedication and absorption are generally noted as the defining attributes of the concept. Vigor relates to the positive energy and enthusiasm the person brings to work. Dedication refers mostly to commitment and the sense of significance the work has to the employee. Whereas absorption depicts the level of full immersion in work to the extent that time becomes

irrelevant and it is difficult to detach oneself from work (Bargagliotti, 2012; Schaufeli &

Bakker, 2004).

Positive affectivity, or the ability to experience positive emotions in different

situations (Thian et al., 2013), and positive work relationships (Simpson, 2009; Thian et

al., 2013; Wong et al., 2010) were both closely related to work engagement. Predictors

of positive work engagement among nurses were also associated with trust and autonomy

(Bargagliotti, 2012). Trust (b = .19, p < 0.001) and identification with the work group (b

= .41, p < 0.001) influenced work engagement to a great extent (Wong, et. al. 2010).

Professional status, interactions, and intention to leave explained 46% of the variance (p

< 0.001) in work engagement (Simpson, 2009). Factors identified by Adriaenssens et al.,

(2011) as predictors of direct care nurses' engagement included social support from

supervisor (b = 0.17, p < 0.01), and perception of rewards and appreciation (b = 0.13, p

< 0.05) , (Thian et al, 2013). Furthermore, a study conducted with Chinese nurses (n =

511) examined the effect that emotional intelligence and organizational justice had on

work engagement. Both were significant predictors and explained 44% of the variance in

nurses' work engagement (Zhu et. al, 2015).

Work engagement was linked to various positive organization and followers'

outcomes. Meta-analytical findings involving 36 companies reported a strong correlation

between overall satisfaction and employee engagement (Harter, Schmidt & Hayes, 2002).

In nursing, a study of two groups of nurses (185 experienced versus 294 inexperienced),

showed that engagement was significantly linked with how effective nurses were in their

work, and the link became stronger with experience (Spence, Laschinger, Wilk, Cho,

Greco, 2009). In addition, results from a comparative study of a sample of nurses in

Australia ($n = 510$) and USA ($n = 718$) revealed that the effect of engagement on organizational commitment was statistically significant in both samples, and negatively affected turnover in the American sample (Brunetto, Xerri, Shriberg, Farr-Wharton, Shacklock, Newman, & Dienger, 2013) thus highlighting the importance of engagement as an antecedent to nurses' commitment to their hospitals (Brunetto, et al., 2013).

Nurse Job Satisfaction

Job satisfaction, defined as the degree of positive affect toward a job or its components (Adams & Bond, 2000), has been extensively studied in the last two decades. Various definitions and measures (Castaneda & Scanlan, 2014) of job satisfaction were used. There was a conceptual "general agreement that job satisfaction is an affective (i.e., emotional) reaction to a job that results from the incumbent's comparison of actual outcomes with those that are desired, expected, and deserved" (Castaneda & Scanlan, 2014, p.146).

Nurse job satisfaction is valued in healthcare organizations because higher satisfaction is associated with better nursing and patient outcomes (Castaneda & Scanlan, 2014) and is evidenced to be the primary predictor of nurses intent to leave (El Jardali, 2011; Feather, 2015; Wieck, Dols, Northam, 2009). Factors that undermined job satisfaction included lack of involvement in decision making, poor relationship with management, low salaries and benefits, lack of job security, poor recognition and lack of flexibility in scheduling (Albaugh, 2003; El-Jardali, Dimassi, Dumit, Jamal & Mouro, 2009). Relationships were also found between job satisfaction and nurse manager's communication, collaboration, and respect (Feather, et al., 2014; Ulrich, et al., 2014). Dissatisfied nurses were significantly more likely to rate competencies, communication,

collaboration, and respect from their first line nurse manager and administrators as poor (Ulrich, et al., 2014). Similarly, 31% of RNs rated unsupportive and poor management as the top dissatisfier, followed by 14% who rated lack of respect and recognition from management as the second reason for job dissatisfaction (Vital Signs, 2012). To have higher levels of job satisfaction, nurses wanted respect, to be included in communication, and to feel cared for by nurse managers (Feather, et al., 2014).

The attributes of nurse job satisfaction were explored in a concept analysis conducted specifically within the context of Asian culture to highlight conceptual differences compared to western cultures. Social support relationships, workload, and incentives were found to be the most significant attributes of job satisfaction in Asian cultures (Sriratanaprapat, & Songwathana, 2011).

Knowledge about RN job satisfaction in Lebanon is scarce. A survey study of 1,793 nurses employed in 69 Lebanese hospitals showed a high level of job dissatisfaction among nurses related to lack of extrinsic rewards such as pay and benefits (El Jardali, et. al., 2009). Other determinants of job satisfaction in the same sample included age, years of experience, and degree type (El Jardali, et. al., 2009). Nurses 30 years and younger reported the lowest satisfaction on all job aspects; whereas those with lower years of experience, especially less than three years, were least satisfied with career development and participation aspects of their job. On the other hand, nurses with higher educational degrees were least satisfied with career development prospects (El Jardali, et. al., 2009).

Leader Effectiveness

Traditionally, leadership effectiveness was studied using a functionalist approach which focused on predicting the relationships between a leader's behaviors and measures of effectiveness such as follower's career advancement, and unit of work or organizational effectiveness (Hamlin & Hatton, 2013). Less traditional approaches are now adopted for studying and measuring leadership effectiveness. For example, leadership effectiveness is investigated using multiple raters such as the superiors, subordinates, peers or colleagues (Hamlin & Hatton, 2013). Predictors of leadership effectiveness included cultural context, attributes of followers, and followers' perceptions (Ordun, & Beyhan Acar, 2014). Effective leadership was perceived differently in various contexts (Owusu-Bempah, 2014). For example, leaders who are assertive are perceived to be effective in the United States. On the other hand, leaders who are less visible and leading from the backstage are equated with effectiveness in Japan. Therefore, to understand a leader's effectiveness is to understand follower's expectations and preferences in the contexts in which it is measured (Owusu-Bempah, 2014).

Conceptually, leader effectiveness is defined as the manager's effectiveness perceived by the followers (Hamlin & Hatton, 2013). Effective managers are able to transcend the relationship with the followers to a higher level (Bass & Bass, 2008). Followers perceive that their manager motivates and influences them to clearly understand the importance and the higher purpose of the task and thus engages them so they do more than expected for the sake of the organization or unit (Bass & Bass, 2008). Effective nursing leadership is a complex process and requires more than the application of management and leadership theories to practice (Benner et al., 2009; Cathcart,

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Greenspan, & Quin, 2010; Mannix, Wilkes, & Daly 2013). Effective nurse leaders

possessed relationship-based competencies that were associated with leadership

effectiveness in contrast with other technical or financial competencies (Cummings, et.

al. 2008). Thus, nursing leaders must identify a situation and adopt the skills suitable to

address it. Emotional intelligence, an ability involving relationship-building, and the

ability to influence a positive work environment were identified as key attributes for

successful nurse leaders (Pearson, et al., 2007). Transformational leadership, a style in

which the leader works in tandem with followers (Northhouse, 2010), was found to be the

best predictor for leadership effectiveness, satisfaction with leadership, and leader extra

effort (Casida & Parker, 2011).

An understanding of direct care nurses' perceptions is vital when evaluating

leader effectiveness because nurses and their leaders often do not share the same opinion

which affects job satisfaction (Ulrich, Lavendero & Early, 2014). This knowledge is

limited in nursing research (Kean, Haycock-Stuart, Baggaley, & Carson, 2011). In one

large survey involving more than 8000 nurses in the United States, leaders'

competencies, such as skilled communication, true collaboration, effective decision

making, appropriate staffing, meaningful recognition, and authentic leadership, were

rated low by dissatisfied nurses (Ulrich, et. al., 2014). These findings represent what

matters the most to RNs in their nursing leaders (Ulrich, et. al., 2014). The trajectory

seems evident: effective leaders influence nurse job satisfaction and healthy work

environments, which, in turn, affects patient outcomes (Friese, Lake, Aiken, Silber &

Sochalski, 2008).

Theoretical Framework

Because no one theory could fully represent the relationships among the fundamental concepts of the study, a middle range theory (MRT) of follower- centric predictors of job satisfaction and leader effectiveness perception was tested. A deductive – inductive reasoning process was used to generate the model, *Follower-Centric Model for the Predictors of Leader Effectiveness and Job Satisfaction* (Figure 1). Reviews of related theoretical discourses, using a deductive process, was undertaken to depict possible explanations and interactions among phenomena of interest. Then, empirical evidence was examined to understand the connections among the different elements of the model. The theories which mostly influenced this deductive process are: (a) Leader-member exchange theory (Graen , et al., 1995); (b) Leadership identity construction process (DeRue & Ashford, 2010); (c) Inclusive leadership (Hollander, 2008); (d) Follower self-concept, implicit leadership theory , and preferences of leadership (Ehrhart, 2012).

Linkages among the concepts of the proposed model were supported by empirical evidence. The focus of this study was to understand the impact that follower-centric latent variables (quality of the relationship with leader and work engagement) have on perception of leader effectiveness and job satisfaction. Empirical findings suggest that high quality relationships are associated with job satisfaction and commitment to the organization (Dulebohn, et. al., 2012; Gerstner & Day, 1997; Graen & Ulh-Bien, 1995) with reported medium effect sizes ($r = .46$) for job satisfaction and ($r = .35$) for organizational commitment (Gerstner & Day, 1997). Further, findings of empirical studies reported that high quality of relationships is related to satisfaction with supervisor

(Deluga & Perry, 1991; Gerstner& Day, 1997), and perceived supervisor effectiveness β = .66, p < .001 (Deluga & Perry, 1991). Work engagement was correlated with better satisfaction at work, r =.77 (Harter, Schmidt & Hayes, 2002), decrease in nurse turnover and higher organizational commitment (Brunetto, et al., 2013). All of which might positively influence a high leader - member relationship.

This proposed multivariate conceptual model is hypothesized to be a MRT in nursing. The ladder of abstraction advanced by Smith and Liehr (2008) was used to offer a coherent definition of the conceptual model in relation of the three discourse levels applicable to the discipline of nursing: The philosophical, theoretical, and empirical (Smith & Liehr, 2008). The philosophical level is the highest level of beliefs and assumptions accepted to be true and core to the theory (Smith & Liehr, 2008). The model is proposed to fit the interactive-integrative paradigm whereby it describes relationships and emotional interactions of the follower RN in the social context (work) environment with the leader (NM). The second abstraction level in the ladder is theoretical which refers to the range of the theoretical realm where the structure lies (Smith & Liehr, 2008). The articulation of the set phenomena of interest in this model and the logical interrelations proposed to link them matches the middle range theoretical realm and abstraction level. The central phenomenon of this MRT is the follower. It was hypothesized to explain the impact of followers' antecedents that are affective (work engagement), and relational concepts (quality of leader follower relationship) on consequences that are perceptual and affective in nature such as perception of leader effectiveness and job satisfaction. At the empirical ladder level, this MRT will be tested using a quantitative approach and measures related to each concept.

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It is hypothesized that the predictive power and generalization of the model are enhanced because of its anticipated ability to generate conclusions at various levels. The follower - centric predictor variables are advanced in the relational, affective domains. In addition, the outcomes (perception of leader effectiveness and job satisfaction) are perceptual and affective consequences, empirically influencing the relational domain (leader – follower relationship; Dulebohn, et. al., 2012; Gerstner & Day, 1997; Graen & Ulh-Bien, 1995) and affective (work engagement) domain (Brunetto, et al., 2013) in the follower.

Follower-Centric Model for Predictors of Leader Effectiveness and Job Satisfaction

LEADER-MEMBER RELATIONSHIP [LMX-7]

PERCEPTION OF LEADER EFFECTIVENESS [LEM]

JOB SATISFACTION [JSI-4]

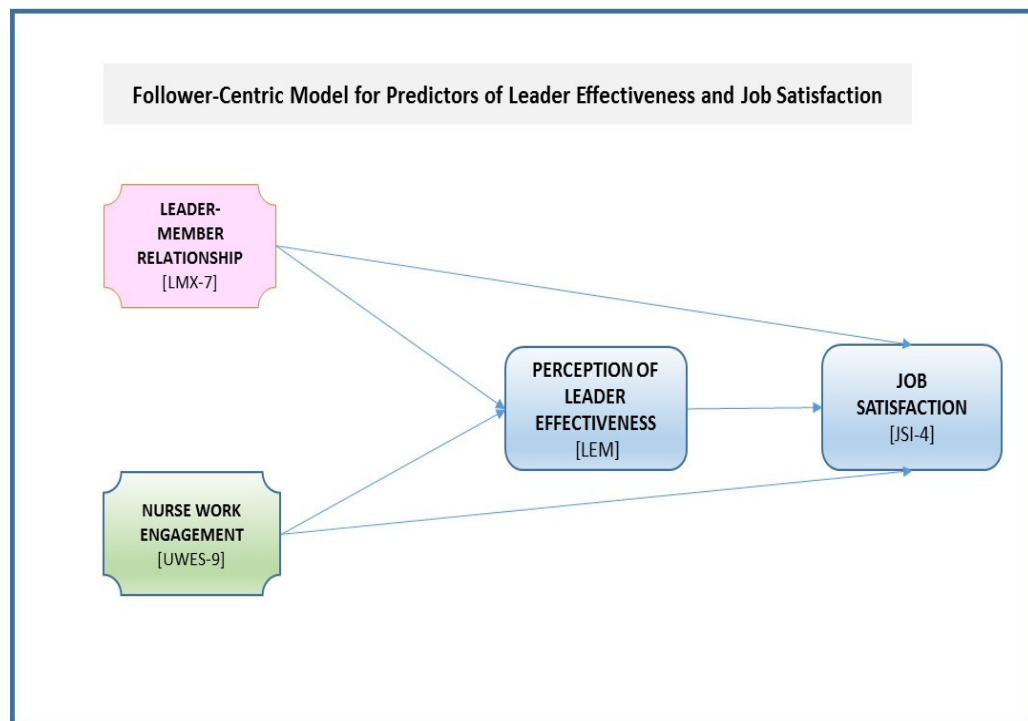NURSE WORK ENGAGEMENT [UWES-9]

Figure 1. Proposed Conceptual Model

Hypothesis

This study examined the effect of follower-centric predictors (RNs' perception of their relationship with their leader and work engagement) on the RNs' perception of

leader effectiveness and job satisfaction in acute care nursing in Lebanon. The following

hypotheses were tested:

1.　　(Ha1): Leader follower relationship and work engagement explain variation in

　　　 leader effectiveness.

2.　　(Ha2): Leader follower relationship, work engagement, and leader effectiveness

　　　 explain variation in job satisfaction

　　　 The results of this model testing will guide future nursing retention efforts and

leadership development at the national level. It is hoped that these efforts will improve

nursing leadership outcomes and effective followership among Lebanese nurses, which

will promote nurse retention and improved patient outcomes.

Design and Methods

Design

　　　 A predictive correlational design was used to survey RNs (followers).

Sample and Setting

　　　 The convenience sample included licensed RNs ($N = 127$) practicing in acute care

in medium to large health organizations (HCOs) in Lebanon. The study population was

accessed through the Order of Nurses of Lebanon (ONL) database. The database

includes all the licensed nurses eligible to practice in the country which accounts at

present for around twelve thousand nurses. Participants had at least one year work

experience and were under the leadership of the same nurse manager for a minimum of

12 months. Using G* power (Faul, Erdfelder, Buchner, & Lang. 2009), the minimum

estimated study sample size was 90 (confidence interval of 95%, margin error of 5%, a

medium effect size of 0.2, and a 3 predictors model). These values were estimated a

priori based on reported effect sizes: (a) quality of leader-member relationship on job

satisfaction, $r = .46$ (Gerstner & Day, 1997) and perceived leader effectiveness $R^2 = .41$ (Deluga & Perry, 1991); (b) nurse work engagement on job satisfaction $r = .77$ (Harter, et al., 2002).

A convenience sampling approach was used. Oversampling targeted a sample size of 120 because the theoretical model was tested for the first time. In addition, paternalism, a salient cultural feature (Aycan, 2006), prompted concern about low recruitment response. Paternalism in work setting denotes a superior who treats his subordinates in a fatherly manner (Aycan, 2006). In such cultural context, the followers might be apprehensive about providing opinions regarding their NM. To help reach this target, reminders to participants to complete the survey and offering incentives in the form of a drawing for three gift vouchers (US $50 each) were provided and improved subject response. A total of 350 RNs accessed the survey link online. Of those who accessed the site, 238 RNs met the inclusion criteria, and 127 completed the entire survey.

Study Variables and Instruments

Four instruments were used for data collection. The predictor variables were measured using: (a) Leader Member Exchange (LMX-7) for quality of leader-member relationship and (b) Utrecht Work Engagement Scale (UWES-9) for nurse work engagement. The outcome variables, Leadership Effectiveness Measure (LEM) measured perception of leader effectiveness and Job Satisfaction Index (JSI-4) was used to measure job satisfaction.

To overcome possible language barriers, instruments were provided in two languages (English and French) and participants chose their preferred language. In

Lebanon, French and English are considered secondary languages with English being spoken by about 30% of the population and French being spoken by 45% of the Lebanese population (Wikipedia, 2016). The study instruments were translated to French using professional translators then back translated to English by another professional translator. At the final stage, the researcher assessed the original and back translated versions for preservation of the initial meanings. No major differences were found.

Leader Member Exchange (LMX-7) was initially developed by Dansereau, Graen, & Haga, in 1975 and progressed later   to measure the quality of *leader and follower relationship* and how much the relationships are characterized as partnerships (Graen & Ulh-Bien, 1995). LMX-7 is composed of seven questions using a 5 -point rating scale ranging from 1 to 5. Responses are summed with a total possible range between 7 and 35 yielding continuous level data. Higher scores indicate higher quality relationship between the leader and the follower. Cronbach alpha was reported to be .86 (Volmer, Spurk, & Niessen, 2012). Graen & Ulh-Bien (1995) and other meta-analytical reviews (Dulebohn, et. al., 2012; and Gerstner& Day, 1997) concluded that the 7-item LMX, with the core item of "How effective is your working relationship with your leader?" was the most appropriate and recommended measure of LMX"(Graen & Ulh-Bien, 1995,p 236). LMX-7 might incorporate three dimensions (*trust, respect*, and *mutual obligation)*; however the dimensions were highly interrelated; therefore the scale is considered to be unidimensional (Graen & Ulh-Bien, 1995; Gerstner & Day, 1997).

Utrecht Work Engagement Scale (UWES-9) is a 9-item short version of the larger UWES (including 17 items) used to measure *work engagement* (Schaufeli & Bakker, 2004). The short version had a Cronbach alpha of .94 as compared to the 17 item version

(Schaufeli & Bakker, 2004). The scale uses a 7 point rating scale ranging from (0-6), and a score range of 0 -54 yielding continuous level data. The scale is composed of three dimensions (vigor, dedication, and absorption). Psychometric studies showed that the three dimensions are highly correlated and can be considered a one dimensional scale (Schaufeli & Bakker, 2004). Correlations between the (latent) factors of the UWES, especially in the short version, suggest that the instrument is composed of one factor. The measure also showed stability in different cultural and work settings including nursing. The French translated version has been reported to have a Cronbach's α ranging between. 89 to .97 (Schaufeli & Bakker, 2004).

Leadership Effectiveness Measurement (LEM) is a 4-item test measuring *leader effectiveness* (Chua & Iyengar, 2011) with respect to leading the group, meeting organizational needs, representing followers at higher organizational levels and meeting job related needs. LEM's items were initially adapted from the Multifactor Leadership Questionnaire and served to measure the "outcomes of leadership" (Bass & Avolio, 1997; Chua & Iyengar, 2011). The items are scored on a 7-point scale, with a reported Cronbach's alpha of 0.87 (Chua & Iyengar, 2011) and total score range of 4 and 28. Higher scores reflect RNs' perception of highly effective leaders.

Nurse Job Satisfaction Index (JSI-4) is composed of 4 items (Wieck, Dols, & Northam, 2009). The total score is obtained by summing the score of the four questions. Each response has a four-point scale with the exception of the last item, which has a five-point scale. Higher scores indicate higher nurse job satisfaction. The sum score ranged from 4-17 yielding continuous level data. Alpha reliability was .85, and factor analysis supported a one dimensional measure (Wieck, Dols, & Northam, 2009).

Ethical Considerations

Institutional board review (IRB) approval was obtained from the University of Texas at Tyler before initiation of the study. The Order of Nurses in Lebanon approved database access. Securing confidentiality and anonymity of the subject responses during data collection, analysis was strictly observed by administering the survey through a secure online link (Qualtrics) that was directly sent to the respondent's email with no identifiers traced back to submitted surveys. The first section included an introduction detailing the purpose of the study, a clear statement regarding freedom to take the survey, and guarantee anonymity of responses. The collected data was directly imported for data analysis purposes with very minimal data entry manipulation.

Procedure

Data were collected via a self-administered online survey using Qualtrics. Invitational emails including consent were sent to RNs. Study inclusion criteria were built in the online survey, whereby participants whose responses did not align with the inclusion criteria were not allowed to complete the survey. The data collection period extended over one month.

Data Analysis

The Statistical Package for the Social Sciences software, version 22 (SPSS, Chicago, IL. USA) was utilized for data analysis. Demographics data are reported using descriptive statistics. Then exploratory data analysis and instrument reliability testing were performed to evaluate whether data met assumptions and instruments yielded acceptable Cronbach alpha. Finally multiple regression (hierarchical) was used to test the model in explaining variances in the dependent variables.

Demographics

Demographic profiling of the sample ($N = 135$) are detailed in Table 1. The mean age of respondent nurses was M = 33 years, SD = 9.2. The mean years of experience was $M = 8.7$, $SD = 6.3$; and mean experience with same nurse manager was M = 6.5 years, SD = 5.3. The majority of the respondents were females (75 %) and held a bachelor degree (53 %). Sixty-five percent of the respondents worked in Beirut, (81%) in accredited acute care centers and (79%) worked in a hospital with a bed size mostly exceeding 100 beds.

Table 1 Demographic Profile of the Sample

Data	N (%)
Gender	
Male	28 (24.8 %)
Female	85 (75.2 %)
Highest education level attained	
'Technique Superieur' (TS) degree	3 (2.2%)
'License Technique' (LT) degree	20 (14.5%)
BSN degree	74 (53.6%)
Masters or Higher	41 (29.7%)
Location of work hospital	
Beirut	93 (68.4%)
Mount Lebanon	31 (22.8%)
South of Lebanon	2 (1.5%)
North of Lebanon	6 (4.4%)
Bekaa	2 (1.5%)
Nabatieh	2 (1.5%)
Accreditation status of work Hospital	
Accredited	111 (81.6%)
Not Accredited	25 (18.4%)
Bed size of work hospital	
Less than 50 beds	5 (3.6 %)

50-100 beds	24 (17.4%)
101-200 beds	36 (26.1%)
More than 200	73 (52.9%)

Instrument Reliability

The instruments were tested to evaluate reliability since the scales were

administered in two languages (English and French) for the first time in the same study in

a Middle Eastern culture. Instruments used in the study showed reliability scores within

acceptable range (Table 2).

Table 2 Study Instruments Reliability Scores Compared to reported Alpha

Instrument	Reported Cronbach alpha (α)	Study Cronbach alpha (α)	N
LMX -7	.86	.89	138
UWES-9	.87-.97	.92	138
LEM	.87	.92	138
JSI-4	.85	.77	138

Correlations of Predictor Variables

The correlation among predictor variables was evaluated using Pearson's r. None

of the predictors showed high statistical correlation exceeding ($r = .9, p < .05$). The

results are detailed in Table 3. Leader - follower relationship did not highly correlate

with perception of leader effectiveness ($r = .76, p < .01$) and work engagement ($r = .42, p$

$< .01$) respectively. While perception of leader effectiveness and work engagement

showed a low correlation of ($r = .33, p < .01$).

Predictor variables were correlated with demographic data. Only Leader -

follower relationship showed a weak positive significant correlation ($r = .17, p < .05$)

with time working with same nurse manager. All other predictors were not correlated

with age, experience, highest education attained, and time working with same nurse

manager.

Table 3 Correlations of Model Predictors

		LMX	LE	WE
Leader - Follower Relationship (LMX)	Pearson	1	.764**	.429**
	Sig		.000	.000
	N	138	138	127
Leader Effectiveness (LE)	Pearson	.764**	1	.335**
	Sig.	.000		.000
	N	138	138	127
Work Engagement (WE)	Pearson	.429**	.335**	1
	Sig.	.000	.000	
	N	127	127	127

**. Correlation is significant at the 0.01 level (2-tailed).

Multiple Regression

The model proposed in *Figure 1* was tested using hierarchical multiple regression

to explain variances in outcome variables of perception of leader effectiveness and job

satisfaction. One predictor, emotional intelligence ability, was initially included but was

removed because it had no significant effect. The first section of the model was tested

and included perception of leader effectiveness as dependent variable and leader -

follower relationship and work engagement as predictors. Fifty-five percent of the

variance in the followers' perception of leader effectiveness ($R^2 = .55$, $p < .01$) was

explained. Thus *Ha1: Leader follower relationship and work engagement explain*

variation in leader effectiveness, is partially accepted because work engagement had a

non-significant beta; whereas leader-follower relationship showed a high beta weight ($\beta =$

.74; $p < .01$). This is attributed to the initially reported statistically significant correlation

between leader-follower relationship and perception of leader effectiveness ($r = .76$, $p <$

.01).

The second section that was tested included job satisfaction as dependent variable and leader-follower relationship, work engagement and perception of leader effectiveness as predictors which explained *54%* of the variance in JS ($R^2 = .54$, p < .01). Thus accepting the alternative *Ha2: Leader follower relationship, work engagement, and leader effectiveness explain variation in job satisfaction*. Beta weights of both models are presented on the diagram in *Figure 2*
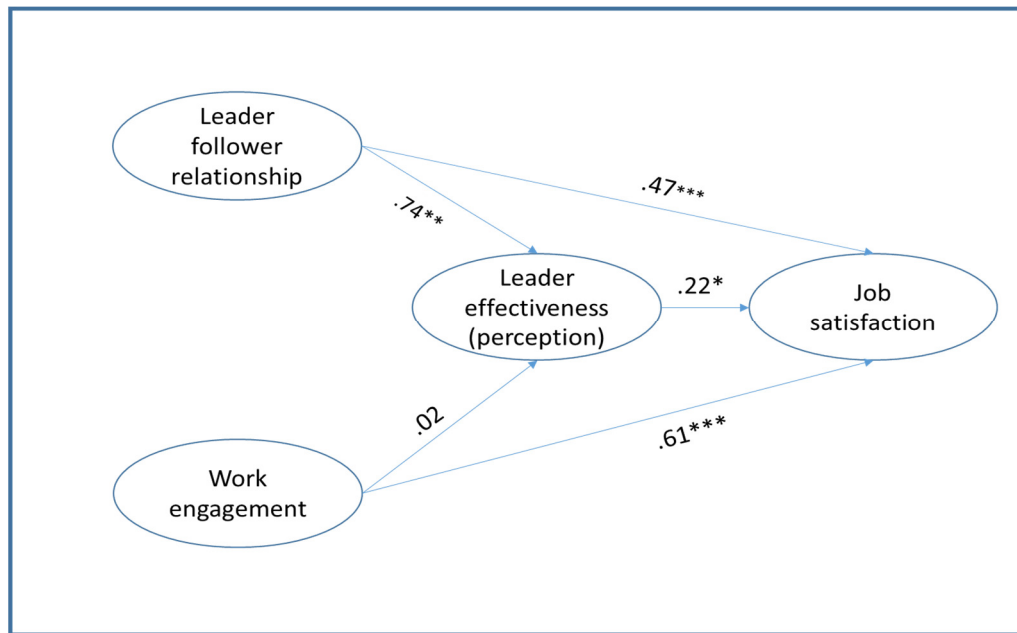
*p<.05. ** p<.01. ***p<.001

Figure 2. Multiple Regression Beta Weights in Tested Model

Discussion

This study tested how RN follower-centric predictors affected the outcomes of perception of leader effectiveness and job satisfaction. The proposed model suggested that positive relationships with the nurse manager and work engagement will engender a positive perception of leader effectiveness and increase job satisfaction.

The results of this study support the hypothesized model. RNs (followers) who reported high quality relationship with their managers also perceived their managers to be

effective leaders. In addition, engaged followers who had a high quality relationship with their managers had higher levels of job satisfaction.

The findings in this study align with previous empirical conclusions. Positive relationships improved both overall job satisfaction (Dulebohn, et. al., 2012; Graen & Ulh-Bien, 1995; Gerstner& Day, 1997) and perceived supervisor effectiveness, (β = .66, $p < .001$) (Deluga & Perry, 1991). Also, work engagement was associated with better job satisfaction, ($r =.77$) (Harter, Schmidt & Hayes, 2002).

This study sheds new light on follower's perceptions of leader effectiveness related to job satisfaction in nursing. The trajectory is evident; a positive relationship with the managers will enhance the followers' perception of leader effectiveness and both contribute to increased levels of job satisfaction. The positive effect work engagement has on followers' job satisfaction (β = .61, $p <.001$) is a new perspective which aligns with non-nursing meta-analysis conclusions drawn by Harter, Schmidt, and Hayes (2002).

Other predictors of Lebanese nurse job satisfaction were explored in a previous national study (El Jardali, et.al, 2009) which presented factors contributing to job satisfaction and intent to leave among Lebanese nurses. Nurses reported to be least satisfied with amount of extrinsic rewards (pay and benefits), scheduling, interaction opportunity, and control and responsibility (El Jardali, et al, 2009). These factors could explain the remaining variance above 54% in nurse job satisfaction found in this study.

Findings support the effect of work engagement on followers' satisfaction (β = .61, $p <.001$). This effect is considerable and it plays a role in increasing the enthusiasm, vigor, and dedication of followers in the job (Kelley, 1988; Schaufeli & Bakker, 2004).

Engagement increases motivation level in followers, which will eventually impact positively the followers performance (Bjugstad, et.al., 2006; Kelley, 1988) and their organization commitment (Brunetto, et al., 2013). When a leader demonstrates respect and trust in the followers' abilities to achieve, motivation is activated in the followers and becomes the driver for them to succeed and become effective. Effective are differentiated from ineffective followers by their enthusiasm and independent involvement in the unit and organizational goals (Bjugstad, et.al, 2006; Kelley, 1988). Thus engagement will fuel motivation and enthusiasm in followers, and this in turn will induce them to display more effective followership.

Nurse Managers and clinical leaders are well-positioned to positively influence the work environment and promote better work relationships and engagement of followers. A recent Gallup survey showed that as high as 70% of the employee engagement is manager dependent (Harter & Adkins, 2015). Consistent and effective communication, genuine investment in the employees as people, setting clear performance expectations, and focusing on employees' strengths were all key steps for managers to boost engagement and rally effective followers for better outcomes (Harter & Adkins, 2015). Designing leadership development and management training interventions focused around these steps are intended to improve the nurse managers' skills and effectiveness in the eyes of their employees, and result in better effective followership behaviors among Lebanese nurses.

Followers on the other hand can benefit from the findings of this study to increase their insight. RNs who build high quality relationships with their leaders will likely be more satisfied. Likewise, being genuinely engaged and committed to one's profession

seems to have valuable payoffs. The well - known saying 'communication is key' has

never been more true. Respectful and honest interactions, genuine involvement, and

accountability for one's performance will bring effective followership to different and

higher level (Bjugstad, et. al., 2006).

Study Limitations

The findings in this study should be interpreted taking into consideration several

limitations. A limited ability to generalize the findings is due to the lack of cause and

effect conclusions driven from correlational predictive design, cultural specificity of

study population, and social desirability in the subject's responses. First, causal inference

should be made with caution due to the cross-sectional design and the convenience

sampling approach used in the study. Longitudinal studies with randomized samples are

necessary to confirm the causality of these relationships. Second, cultural specificity and

the threat of social desirability attributed to 'paternalism' in the study population might

limit the larger representation of the conclusions. Therefore, the study results call for

replication through larger and more culturally diverse investigations.

Conclusion

Followers have not been thoroughly researched, and related studies were

generally viewed in a traditional leader-centric perspective. This study tested a

multivariate model including predictors centered around follower's relationships with the

leader and engagement and their effect on perception of leader effectiveness and job

satisfaction. The study was conducted in Lebanon, involving registered nurses practicing

in acute care settings. Similar surveys have not been conducted in Lebanon including

both English- and French-speaking participants and testing a conceptual model

addressing followers' characteristics that impact job satisfaction. The concepts of interest and their implications are studied from the followers' perspective, thus bringing a novel dimension to the classic leader - centric approach. Results supported the positive effect high quality relations with the manager and work engagement has on enhanced perception of leader effectiveness and increased job satisfaction levels in RNs.

Findings of this study enhance the understanding of follower-centric factors impacting job satisfaction of Lebanese nurses and how RNs perceive their nurse managers' leadership capacities and their relationship with them. Leaders should nurture positive relationships with followers and engage them in the professional nursing context. Findings suggest these efforts will increase nurse job satisfaction and positive perceptions of the leader's effectiveness. It is hoped that this in turn will lead to nurse retention and positive patient outcomes. Conclusions drawn will guide leadership development efforts focused on improving the quality of the exchange between the leader and follower which may result in investing in ways to improve work engagement in RNs to generate positive followers' outcomes. These findings align with Uhl-Bien et al. (2014) regarding followership outcomes which were suggested to be dependent on the individual follower characteristics, the relationship with the leader, and the process of leadership. They represent the results of the interaction between the followers' characteristics and behaviors within the leadership process. Followers' effectiveness demonstrated by independent, engaged, committed, loyal, and courageous follower's behaviors is one outcome identified occurring at the individual follower level. Whereas, trust and positive leader-member exchange are outcomes expected to materialize within the leader-follower relationship (Uhl-Bien et al., 2014). Clinical leaders who are supportive and build

meaningful relationships with their followers based on trust, respect, and a sense of mutual obligation will increase RNs' satisfaction levels and thus promote retention.

Interpretation of the current findings take into consideration the cultural characteristics of the study population, such as paternalism, high impact nurse migration. These factors render the results and conclusions generated from this study relevant to Lebanese acute care nurses. However future comparative and replication studies looking into diverse cultural context across EMR countries and using Arabic translated instruments will allow wider generalization of the results and further validation of the generated theoretical model used in this study.

Recommendations for future research calls for further testing of the model using methodological triangulation research across other Middle Eastern cultures to better confirm the achieved results. This type of validation is an attempt to explain more fully the richness and complexity of affective, perceptual, and relational factors intrinsic to the followers and that are at interplay in nurse job satisfaction. Also dyadic and generational approaches are important considerations for future nursing research pertaining to leader-followers dyads. Many generations of nurses coexist together and they do perceive and value the workplace differently, each from the lens of own generation or formal position. Generational research will bring insight into the specific needs and perceptions of mutigenerational nursing followers and will permit crafting innovative work environment changes and retention initiatives that are generation relevant (Wieck, et. al., 2009). Whereas dyadic studies will be important to match perceptions and perspectives of leaders and followers for a full range understanding of the situation in which the leadership process is exercised.

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Chapter Four

Evaluation of the Project

Sufficient numbers of nurses is a crucial element in the achievement of positive healthcare outcomes (Kane, Shamliyan, Mueller, Duval & Wilt, 2007; Needleman, 2015). During times of global shortage, it is important to understand factors that affect nurses' perceptions of effective leaders and how such perceptions affect overall job satisfaction; particularly lacking in the Lebanese nursing professional context. Filling this knowledge gap is needed as a foundation for future nursing retention efforts and leadership development initiatives. The project conclusions will bring to the forefront the impact of high quality leader follower relationships, better engagement of nurses, and enhanced perception of leader effectiveness have on nurse job satisfaction.

This portfolio includes one published article, *A Concept Analysis of "Follower" Within the Context of Professional Nursing* (Abdel Malak, 2016) published in Nursing Forum on May 19, 2016 and one manuscript, *A Follower-Centric Model: Predictors of Job Satisfaction and Perception of Leader Effectiveness in Lebanese RNs*. The goal of this study is to test the author's proposed model of follower-centric determinants of perception of leader effectiveness and job satisfaction.

The idea of followership has received scant attention from the nursing research community and was mostly studied from a leadership perspective. A better understanding of the dynamics and characteristics associated with nursing followers will

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identify key elements needed to generate positive perceptions of leader effectiveness and job satisfaction in the nursing professional practice context. Literature related to quality of leader-follower relationships and work engagement was explored to understand the documented linkages these proposed variables (predictors) have on followers' job satisfaction and perceptions of leader effectiveness. The following relationships were noted in the literature: Leader follower relationships suggest positive follower attitudes, job satisfaction, commitment, and satisfaction with leader and leader effectiveness. Work engagement was positively affected by trust, autonomy, and identification with the workgroup, satisfaction, social support, rewards, and appreciation. In turn, work engagement resulted in greater job effectiveness and organizational commitment. Job satisfaction was affected by social support, relationships, and incentives. Low job satisfaction impacted workers intent to leave and was associated with low perceptions of managers' competence, communication, collaboration and respect. The following factors impacted leadership effectiveness: Culture, follower characteristics and perceptions. The availability of literature discussing work engagement as predictor of positive outcomes in nursing is limited.

A middle range theory (MRT) was developed because no theoretical model could fully relate to the foundational study concepts. Using a deductive – inductive reasoning process of relevant theoretical discourse and empirical studies the model *Follower-Centric Predictors of Job Satisfaction and Leader Effectiveness Perception* was generated to serve as the theoretical underpinning of the study. . This multivariate conceptual model is hypothesized to be an MRT in nursing and was evaluated using the ladder of abstraction advanced by Smith and Liehr (2008) to identify its placement in

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relation to the three discourse levels applicable to the discipline of nursing: The philosophical, theoretical, and empirical (Smith & Liehr, 2008). This model is proposed to be an MRT fitting the interactive-integrative paradigm that describes relationships and affective interactions of the follower RN in the social context (work) environment with the leader (Nurse Manager), and which was empirically tested in this study.

A predictive correlational design was used to survey RNs (followers) working in acute care in Lebanese hospitals. The study population was accessed through the Order of Nurses of Lebanon (ONL) database. The database includes all the licensed nurses eligible to practice in the country which accounts at present for around twelve thousand nurses. The convenience sample consisted of RNs ($N = 127$). Four instruments were used for data collection. The predictor variables were measured using: (a) Leader Member Exchange (LMX-7) for quality of leader-member relationship and (b) Utrecht Work Engagement Scale (UWES-9) for nurse work engagement. For the outcome variables, Leadership Effectiveness Measure (LEM) measured perception of leader effectiveness and Job Satisfaction Index (JSI-4) was used to measure job satisfaction. Also, the instruments were translated to French and back translated to English and provided to participants in both languages to overcome any possible language barriers posed by the multilingual culture of the Lebanese RNs and to allow wider survey accessibility by RNs country wide. Data was collected over one month via a self-administered online survey using Qualtrics. Results revealed that leader-follower relationship and work engagement explain *55 %* of the variation in leader effectiveness (*Ha1* partially accepted), and leader - follower relationship, work engagement, and leader effectiveness explain *54%* of the variation in job satisfaction (*Ha2* accepted). The

findings imply that building meaningful and high quality relationships with the followers would enhance their perception of clinical leaders' effectiveness; better leader-follower relationships combined with higher work engagement will improve satisfaction levels of nurses. Future recommendations include replicating the study with a larger randomized sample using a more culturally diverse target population.

Followers' research has been a traditionally leader-centric and is generally lacking in nursing. This study tested a multivariate model including the determinants of follower's relationship with the leader, their work engagement, and their perception of leader effectiveness on job satisfaction. The study was conducted in Lebanon, involving registered nurses practicing in acute care settings. Similar surveys have not been previously conducted in Lebanon including both English and French speaking participants and testing a conceptual model addressing followers' characteristics that impact job satisfaction.

The value of engaged followers alongside effective clinical leaders is important for enhanced outcomes at team, unit, and organization levels (Whitlock, 2013). Effective clinical leaders require more than the application of management and leadership theories into the practice (Benner, Tanner, & Chesla, 2009). The relationship between nurses and their leaders is not direct (Weberg, 2012). The rise of shared governance, flatter organizations, and global nursing shortages has created a paradigm shift and placed the followers at the center of any discourse pertinent to professional nursing. The implications of the study findings are important for both the leaders and followers in Lebanese nursing clinical practice. For leaders, the call for building high quality relationships that are nurturing and respectful of the RNs is supported. The ripple effect

these relationships creates is considerable. They shape nurses' perceptions in identifying their leaders as effective, and there is an indication that improved relationships will improve the nurses' job satisfaction. For followers, striving to be committed, enthusiastic, and dedicated for their work while fostering a positive work relationship with their leaders has many positive implications. It will improve job satisfaction while allowing them to enjoy the consequences of a positive exchange with their leader; an exchange based on trust, respect, and mutual reciprocation. In a time of global shortages of nurses, it is important to increase the odds of higher nurse satisfaction for both leaders and followers. Understanding the dynamics of the leader-follower relationship is an important first step in creating a positive work environment which attracts and retains nurses by showing respect and concern about the contributions of all members of the healthcare team.

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Appendices

Appendix A: UT Tyler- Institutional Board Approval

THE UNIVERSITY OF TEXAS AT TYLER
3900 University Blvd. • Tyler, TX 75799 • 903.565.5774 • FAX: 903.565.5858

**Office of Research and
Technology Transfer**

Institutional Review Board

March 24, 2016

Dear Ms. Abdel-Malak,

Your request to conduct the study: *Effects of Predictors on Leader Effectiveness and Job Satisfaction: A Follower Centric Approach,* IRB #SP2016-89 has been approved by The University of Texas at Tyler Institutional Review Board as a study exempt from further IRB review. This approval includes a waiver of signed, written informed consent. In addition, please ensure that any research assistants are knowledgeable about research ethics and confidentiality, and any co-investigators have completed human protection training within the past three years, and have forwarded their certificates to the IRB office (G. Duke).

Please review the UT Tyler IRB Principal Investigator Responsibilities, and acknowledge your understanding of these responsibilities and the following through return of this email to the IRB Chair within one week after receipt of this approval letter:

- Prompt reporting to the UT Tyler IRB of any proposed changes to this research activity
- **Prompt reporting to the UT Tyler IRB and academic department administration will be done of any unanticipated problems involving risks to subjects or others**
- Suspension or termination of approval may be done if there is evidence of any serious or continuing noncompliance with Federal Regulations or any aberrations in original proposal.
- Any change in proposal procedures must be promptly reported to the IRB prior to implementing any changes except when necessary to eliminate apparent immediate hazards to the subject.

Best of luck in your research, and do not hesitate to contact me if you need any further assistance.
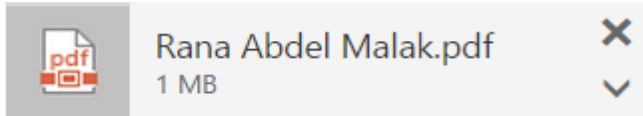
Sincerely,

Gloria Duke, PhD, RN

Gloria Duke, PhD, RN
Chair, UT Tyler IRB

Appendix B: Database Access Approval - Order of Nurses of Lebanon

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Subject: Fw: Order of Nurses in Lebanon- data access approval

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From: Director Order Of Nurses [mailto:director@orderofnurses.org.lb]
Sent: Monday, February 16, 2015 3:49 PM
To: 'Rana Abdel Malak'
Subject: document

Dear Rana,
Kindly find attached the approval paper for your research.
Best regards

Nathalie Richa
Director
Order of Nurses in Lebanon
Tel: 01-490774 ext 11

January 21, 2015

Mrs. Helen Samaha Nuwayhid

President, Order of Nurses in Lebanon (ONL)

Sin el Fil, Beirut, Lebanon

Dear Madam,

Greetings,

As you know I am pursuing my doctoral studies in nursing at the University of Texas at Tyler (UTT). I am towards the end of my program's course work and started actively planning for my study. My dissertation work will be supervised by Dr. Beth Mastel-Smith.

My research area of interest is nursing leadership from a followers' perspective. Despite the close nature of the leader-follower relationship, followers in nursing professional context were traditionally poorly studied. Factors attributed to nursing leaders and how they impact the followers' perception of leadership effectiveness and style remain not fully addressed.

A quantitative correlational design will be used. The study purpose is to examine the relationship of emotional intelligence and the ability to influence of the nurse managers on the followers' perception of leadership type and effectiveness. The setting will in private acute care healthcare s in Beirut, Lebanon. Reliable and valid instruments were selected to measure the following variables in my population of interest:

- Emotional intelligence (Nurse managers as the target group in the population of interest)
- Influence behaviors of (Nurse managers as the target group in the population of interest)
- Leadership type (Registered Nurses as the target group in the population of interest)
- Leadership effectiveness (Registered Nurses as the target group in the population of interest)

Data will be collected via a self-administered online survey for both groups. The study instruments will be offered in two languages (English and French) to increase the chance of sample recruitment and data reliability.

It is anticipated that my study proposal will be defended and UT Tyler IRB approval secured in September 2015. Data collection will take place between October and December 2015. Data analysis and interpretation will take place in January 2016.

I am writing to request permission to access the study population through the Order's registry database. The database will only be used to locate study participants and to access them via electronic means. Kindly note that the online surveys include information about the study and consent is implied when the participant completes the questionnaires. Respondents can elect either to accept or decline participation, and may as well stop participation at any point during data collection. No participants personal identifiers will be used during the process of data collection and all the data will be highly preserved for confidentiality and privacy of the information. Collected data will kept under password
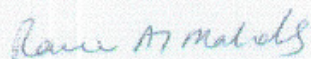
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21/1/2015

protected files. The electronic storage device will also be secured for limited access restricted only to the study investigator.

Conclusions drawn from this study will guide future nursing leadership development at a national level in order to engender improved nursing leadership outcomes and effective followership behaviors. This study will enhance the understanding of how Lebanese nurses perceive their nurse managers' leadership capacity. It will serve as a starting point in filling the current gap at a national level in this area. It also aligns well with the nursing research priority of the World Health Organization (WHO) in the East Mediterranean Regional Office (EMRO) focusing on nursing leadership development.

Finally, I am available for any question or inquiry you might have. I am very hopeful that this research conducted in close collaboration with ONL will set forth the path for other similar endeavors that will map out the needs, gaps, priorities, and strengths pertinent to the Lebanese nurses at all levels.

Sincerely,

Rana Abdel Malak, RN, MSc, NEA-BC

Doctoral Student, University of Texas at Tyler

rabdelmalak@patriots.uttyler.edu

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ع الموافقة

21/11/2015

Appendix C: Permission to Reprint Published Article

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Jun 25, 2016

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Instructions: This questionnaire contains items that ask you to describe your relationship with your leader. For each of the items, indicate the degree to which you think the item is true for you by circling one of the responses that appear below the item.

1. Do you know where you stand with your leader . . . [and] do you usually know how satisfied your leader is with what you do?

1-Rarely

2-Occasionally

3-Sometimes

4-Fairly often

5-Very often

2. How well does your leader understand your job problems and needs?

1-Not a bit

2-A little

3-A fair amount

4-Quite a bit

5-A great deal

3. How well does your leader recognize your potential?

1-Not at all

2-A little

3- Moderately

4-Mostly

5-Fully

4. Regardless of how much formal authority your leader has built into his or her position, what are the chances that your leader would use his or her power to help you solve problems in your work?

1-None

2-Small

3-Moderate

4-High

5-Very high

5. Again, regardless of the amount of formal authority your leader has, what are the chances that he or she would "bail you out" at his or her expense?

1- None

2-Small

3-Moderate

4-High

5-Very high

6. I have enough confidence in my leader that I would defend and justify his or her decision if he or she were not present to do so.

1-Strongly disagree

2-Disagree

3-Neutral

4-Agree

5-Strongly agree

7. How would you characterize your working relationship with your leader?

1-Extremely ineffective

2-Worse than average

3-Average

4- Better than average

5-Extremely effective

Appendix E: Utrecht Work Engagement Scale (UWES-9)

The following 17 statements are about how you feel at work. Please read each statement carefully and decide if you ever feel this way about your job. If you have never had this feeling, cross the '0' (zero) in the space after the statement. If you have had this feeling, indicate how often you feel it by crossing the number (from 1 to 6) that best describes how frequently you feel that way.

	Almost never	Rarely	Sometimes	Often	Very often	Always
0	1	2	3	4	5	6
Never	A few times a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Every day

1. _____ At my work, I feel bursting with energy* *(VI1)*
2. _____ I find the work that I do full of meaning and purpose *(DE1)*
3. _____ Time flies when I'm working *(AB1)*
4. _____ At my job, I feel strong and vigorous *(VI2)**
5. _____ I am enthusiastic about my job *(DE2)**
6. _____ When I am working, I forget everything else around me *(AB2)*
7. _____ My job inspires me *(DE3)**
8. _____ When I get up in the morning, I feel like going to work *(VI3)**
9. _____ I feel happy when I am working intensely *(AB3)**
10. _____ I am proud on the work that I do *(DE4)**
11. _____ I am immersed in my work *(AB4)**
12. _____ I can continue working for very long periods at a time *(VI4)*
13. _____ To me, my job is challenging *(DE5)*
14. _____ I get carried away when I'm working *(AB5)**
15. _____ At my job, I am very resilient, mentally *(VI5)*
16. _____ It is difficult to detach myself from my job *(AB6)*
17. _____ At my work I always persevere, even when things do not go well *(VI6)*

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* Shortened version (UWES-9); VI= vigor; DE = dedication; AB = absorption

Appendix F: Leadership Effectiveness Measurement (LEM)

Instructions: Please indicate the extent to which you agree with each of the following four statements:

Items	Not at all			To some extent			To a great extent
(a) This manager leads a group that is effective	1	2	3	4	5	6	7
(b) This manager is effective in meeting organizational requirements	1	2	3	4	5	6	7
(c) This manager is effective in representing me to higher authority	1	2	3	4	5	6	7
(d) This manager is effective in meeting my job-related needs	1	2	3	4	5	6	7

Appendix G: Nurse Job Satisfaction Index (JSI-4)

	4	3	2	1
Overall, how satisfied are you with your current position?	Highly SATISFIED	Generally SATISFIED	Generally DISSATISFIED	Highly DISSATISFIED
How likely are you to recommend your current employment setting to your nurse colleagues as a desirable place to work?	Highly LIKELY	Somewhat LIKELY	Somewhat UNLIKELY	Highly UNLIKELY
Knowing what you know now, if you had to decide all over gain whether to take the job you have now, what would you decide?	Would definitely take the same job	Would probably take the same job	Would probably NOT take the same job	Would definitely NOT take the same job.

	5	4	3	2	1
To what extent are you fairly rewarded considering the responsibilities you have?	Not at all	To a slight extent	To some extent	To a considerable extent	To a very great extent

Appendix H: Permissions to Use Instruments

LMX 7 - Permission to Use

Re: Contacting Dr. G. Graen

Lmxlotus@aol.com

Sun 6/21/2015 7:35 PM

To: Rana Abdel Malak <rabdelmalak@patriots.uttyler.edu>;

Cc: gjoang@aol.com <gjoang@aol.com>;

You have permission.

In a message dated 6/22/2015 5:02:01 A.M. Samoa Standard Time, rabdelmalak@patriots.uttyler.edu writes:

> Dear Dr. Graen,
>
> Thank you for sharing this important articles regarding the new development of the LMX theory . However for the purpose of my dissertation work I would like to request specifically your permission for the use and the translation (to french) of the LMX7. The requested questionnaire is published in "Relationship-Based Approach to Leadership: Development of Leader–Member Exchange (LMX) Theory of Leadership Over 25 Years: Applying a Multi-Level, Multi-Domain Perspective," by G. B. Graen and M. Uhl-Bien, 1995, Leadership Quarterly, 6(2), 219–247".
>
> Your consideration is highly appreciated.
>
>
> Rana
>
>
> *Rana Abdel Malak*

LEM - Permission to Use

Re: Leadership Effectiveness Measure

Rana Abdel Malak

Tue 4/21/2015 8:06 PM

To:Roy CHUA <royyjchua@smu.edu.sg>;

Dear Dr. Chua,
Many thanks, and for sure I will use the appropriate Leadership Qualterly citation. my best. Rana .

Rana Abdel Malak

From: Roy CHUA <royyjchua@smu.edu.sg>
Sent: Monday, April 20, 2015 3:00 AM
To: Rana Abdel Malak
Subject: Re: Leadership Effectiveness Measure

Rana,

Please go ahead then. I think you just need to cite the Leadership Quarterly article when you use our items.

Best,
Roy

From: Rana Abdel Malak <rabdelmalak@patriots.uttyler.edu>
Date: Saturday, April 18, 2015 5:06 PM
To: Roy CHUA <royyjchua@smu.edu.sg>
Subject: Re: Leadership Effectiveness Measure

Dear Dr. Chua,
 Many thanks for your prompt reply . My permission request pertains to the attached scale (found on PsychsTESTS), and especially that it is going to be translated to French, back translated to English, then administered to participants (as noted earlier) in both languages.

My best, Rana.

Rana Abdel Malak

JSI - Permission to use

K. Lynn Wieck RN, PhD, FAAN
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The University of Texas at Tyler
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September 4, 2015

TO: Rana Abdel Malak, Doctoral Student, University of Texas at Tyler
FROM: K. Lynn Wieck, RN, Ph.D., FAAN

It is my pleasure to grant you permission to utilize the *Wieck Nurse Job Satisfaction Index*® in your research and class work. I am attaching a copy with this correspondence which includes citation and psychometrics information.

Thank you for your interest in this important topic of attracting and retaining nurses. We have found the *Wieck Nurse Job Satisfaction Index*® to be an excellent instrument for making general comments about the preferences of the different generations in today's nursing workforce regarding their perceptions of their satisfaction with their current job. Please note that this is not a career satisfaction instrument; it relates to their current work position only. This instrument has been mostly used with hospital nurses. It has helped us make recommendations to hospital administrators, human resources executives, and nurse managers to assist them in leading and managing an intergenerational workplace with a focus on retention.

You have my permission to use the survey. I wish you good luck in your studies. I would like to be kept informed about your findings at your convenience.

Respectfully,

K. Lynn Wieck

K. Lynn Wieck, Ph.D., RN, FAAN
Chief Executive Officer
Management Solutions for Healthcare

Nursing Professor
The University of Texas at Tyler College of Nursing

Primary Investigator: Cultivating Leadership in the Emerging Workforce Research Program
Primary Investigator: What Nurses Want: The 2007 Nurse Incentive Project